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**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet 1 of 1

**Complete if Known**

Application Number	10/517,843
Filing Date	July 12, 2005
First Named Inventor	Gregory Alan Swords
Art Unit	3774
Examiner Name	Suba Ganesan
Attorney Docket Number	37370-339252

**U.S. PATENT DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Document Number Number - Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US			
		US-			
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**FOREIGN PATENT DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Foreign Patent Document Country Code <sup>2</sup> - Number <sup>3</sup> - Kind Code <sup>4</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>5</sup>
		EP 0 092 260 A	10/26/1983	Kanebo Ltd		
		WO 97/41791 A	11/13/1997	Sofamor Danek Properties, Inc.		
		WO 99/37240 A	07/29/1999	Marcopore, Inc.		

**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		Supplementary Partial European Search Report from EP Appl. No. EP 04759969.1 issued 05/02/2008	
		*Märbacher, S. et al., PRIMARY RECONSTRUCTION OF OPEN DEPRESSED SKULL FRACTURES WITH TITANIUM MESH; The Journal of Craniofacial Surgery, Vol. 19, Number 2, March 2008, pgs. 490-495	

Examiner Signature	/Suba Ganesan/	Date Considered	06/17/2008
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /S.G./